

Abstract 421

TITLE: "By All Means Necessary:" HIV Counseling and Testing Preferences Among Individuals at High Risk

AUTHORS: Spielberg, F¹; Goldbaum, G^{1,2}; Branson, B³; Wood B^{1,2} (¹University of Washington; ²SKCDPH; ³Centers for Disease Control and Prevention, Atlanta, GA)

BACKGROUND/OBJECTIVE: FDA-approved techniques for rapid HIV tests and testing of oral fluids, urine, and dried-blood spots offer opportunities to provide HIV testing to persons who might prefer alternatives to the current serum tests, which require venipuncture samples and return clinic visits. We characterized how different HIV testing and counseling approaches influence testing acceptance at a needle exchange, an STD clinic, and sex clubs for men who have sex with men.

METHODS: A counseling and testing preference survey was developed after focus groups and interviews among 1012 clients and administered to a total of 460 clients from the three venues.

RESULTS: Barriers to HIV testing included fears about finding out results (n = 181), concerns about named reporting (n = 165), anxiety while waiting for results (n = 146), ability to pay for HIV treatment (n = 102), inconvenience (n = 82), and aversion to venipuncture (n = 79). Given a choice of testing methods, clients would prefer rapid testing (25%), home self-testing (19%), oral fluid testing (18%), urine testing (17%), serum testing (16%), and home specimen collection (1%). Some clients (30%) would prefer written materials instead of face-to-face pre-test counseling, and 43% would like to access test results by telephone. If HIV positive, 89% of clients stated they would go to a clinic for early treatment, and 62% would utilize the health department for help with partner notification.

CONCLUSIONS: Barriers to testing included both motivational factors and testing logistics. Client preferences suggest several strategies to improve acceptance of HIV counseling and testing by individuals at risk, such as education to address fears associated with knowing one's HIV status including information about access to anonymous testing and early treatment. Offering options (rapid testing, written materials instead of face-to-face pre-test counseling, and telephone results) might encourage more clients to learn their HIV status. A randomized trial is currently underway to test the effectiveness of these strategies in the three settings.

PRESENTER CONTACT INFORMATION

Name: Freya Spielberg, MD, MPH

Address: HAT Study
1001 Broady, Suite 218
Seattle, WA 98122

Telephone: (206) 296-5076

Fax: (206) 296-4895

E-mail: freya@u.washington.edu